Enhanced Payments to Primary Care Providers

Effective January 1, 2013, certain physicians who provide eligible primary care services to Medicaid clients became eligible to be paid the Medicare rates in effect in calendar years (CY) 2013 and 2014 instead of their usual state-established Medicaid rates. The enhanced rate is available for providers who are fee for service providers with Nebraska Medicaid as well as eligible providers who are enrolled in the Nebraska physical health managed care program. This enhanced rate will only be available for the limited periods of the calendar years 2013 and 2014. At the end of this period, the enhanced federal funding for this program sunsets and the enhanced rate for Medicaid services will end.

As of January 1, 2014, CMS adjusted the enhanced payment of some Medicare codes. This new fee schedule shows pricing of the enhanced rates as of January 1, 2014.

The enhanced payments will pertain to primary care services delivered by a physician (MD or DO) with a specialty designation of family medicine, general internal medicine, or pediatrics. Physician assistants (PAs) who are supervised by a physician who is eligible for the enhanced rate are also eligible to receive the enhanced rate. The increase will apply to a specific set of services and procedures that Centers for Medicare & Medicaid Services (CMS) designates as "primary care services."

In order to qualify for the enhanced rates, eligible enrolled Nebraska Medicaid providers must attest to being a primary care physician by one of the following:

- a. Board certification as a primary care physician by the American Board of Medical Specialties (ABMS), the American Board of Physician Specialties (ABPS), or the American Osteopathic Association (AOA) or
- b. Have furnished evaluation & management (E&M) and vaccine services (codes specified by federal regulation) that equal at least 60% of the Medicaid codes billed during the most recently completed fiscal year.

Eligible providers who may qualify for the enhanced rate must complete an Attestation Form to be submitted with the identified documentation to the Medicaid central office. The attestation form is available and will also be available with additional instructions on the Medicaid provider information section of the Division's website at

http://dhhs.ne.gov/medicaid/Pages/med_provhome.aspx

Providers can send forms and documentation to the following address: DHHS- Medicaid and Long-Term Care Enhanced PCP Rates
P.O. Box 95026
Lincoln, NE 68509-5026

This enhanced rate will only be available for the limited periods of the calendar year 2014. At the end of this period, the enhanced federal funding for this program sunsets and the enhanced rate for Medicaid services will end. To assist in delivery of information, a dedicated email address was created for questions and answers specific to this program

JANUARY 1, 2014 MANUAL LETTER # 20-2014

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

MEDICAID SERVICES 471-000-522 Page 2 of 4

change. Questions and responses are posted on the DHHS website. The email address is: DHHS.EnhancedPCPRates@nebraska.gov

Enhanced Payments to Primary Care Providers Rates in effect January 1, 2014 through December 31, 2014

PROCEDURE		
CODE	MODIFIER	EPC RATE
90471		\$23.25
90472		\$11.74
90473		\$23.25
90474		\$11.74
90633	SL	\$19.82
90647	SL	\$19.82
90648	SL	\$19.82
90649	SL	\$19.82
90650	SL	\$19.82
90655	SL	\$19.82
90656	SL	\$19.82
90657	SL	\$19.82
90658	SL	\$19.82
90660	SL	\$19.82
90670	SL	\$19.82
90680	SL	\$19.82
90681	SL	\$19.82
90696	SL	\$19.82
90698	SL	\$19.82
90700	SL	\$19.82
90707	SL	\$19.82
90710	SL	\$19.82
90713	SL	\$19.82
90714	SL	\$19.82
90715	SL	\$19.82
90716	SL	\$19.82
90721	SL	\$19.82
90723	SL	\$19.82
90734	SL	\$19.82
90744	SL	\$19.82
90746	SL	\$19.82
90748	SL	\$19.82
99201		\$40.35
99202		\$69.70
99203		\$100.85
99204		\$155.38
99205		\$194.33
99211		\$18.71
99212		\$40.68
99213		\$68.52
99214		\$101.41

DDOCEDURE CODE	MODIFIED	FDC DATE
PROCEDURE CODE	MODIFIER	EPC RATE
99215		\$136.19
99217		\$69.05
99218		\$95.11
99219		\$129.73
99220		\$177.31
99221		\$96.18
99222		\$131.03
99223		\$193.65
99224		\$37.95
99225		\$69.62
99226		\$100.28
99231		\$37.50
99232		\$69.09
99233		\$99.63
99234		\$128.25
99235		\$161.60
99236		\$208.52
99238		\$69.39
99239		\$115.64
99241		\$46.26
99242		\$85.88
99243		\$117.61
99244		\$175.56
99245		\$214.58
99251		\$50.11
99252		\$72.45
99253		\$111.05
99254		\$160.95
99255		\$194.16
99281		\$20.43
99282		\$39.46
99283		\$59.04
99284		\$112.24
99285		\$165.46
99291		\$259.17
99292		\$116.58
99304		\$88.20
99305		\$125.66
99306		\$159.80
99307		\$42.61
99308		\$65.57
33306		۷۵.۵/

Enhanced Payments to Primary Care Providers Rates in effect January 1, 2014 through December 31, 2014

PROCEDURE		
CODE	MODIFIER	EPC RATE
99309		\$86.63
99310		\$128.84
99315		\$69.70
99316		\$100.48
99318		\$91.66
99324		\$52.98
99325		\$77.29
99326		\$133.63
99327		\$178.03
99328		\$206.88
99334		\$57.75
99335		\$90.72
99336		\$128.23
99337		\$184.44
99341		\$52.65
99342		\$76.11
99343		\$124.71
99344		\$174.16
99345		\$210.07
99347		\$52.94
99348		\$80.37
99349		\$121.91
99350		\$169.58
99354		\$95.26
99355		\$93.30
99356		\$87.86
99357		\$87.21
99360		\$59.30
99381	EP	\$104.35
99382	EP	\$109.14
99383	EP	\$113.85
99384	EP	\$128.84
99385	EP	\$130.22
99385		\$130.22
99386		\$144.58
99387		\$156.84
99391	EP	\$93.98
99392	EP	\$100.43
99393	EP	\$100.10
99394	EP	\$109.93

PROCEDURE CODE	MODIFIER	EPC RATE
99395	EP	\$112.38
99395		\$112.38
99396		\$119.88
99397		\$128.84
99401	EP	\$34.35
99402	EP	\$59.08
99406		\$13.49
99407		\$26.25
99460		\$109.34
99461		\$92.50
99462		\$49.70
99463		\$126.73
99464		\$98.29
99465		\$140.94
99466		\$237.46
99467		\$118.23
99468		\$887.90
99469		\$381.33
99471		\$819.56
99472		\$385.99
99475		\$549.51
99476		\$331.96
99477		\$334.35
99478		\$135.73
99479		\$119.79
99480		\$115.20
99485		\$80.95
99486		\$69.39